

Fill in this information to identify the case:

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Debtor 1 Thomas M. Medofer

Debtor 2 M. Elaine Medofer

(Spouse, if filing)

United States Bankruptcy Court for the WESTERN District of PENNSYLVANIA

Case number 19-20826-CMB

Official Form 410S2**Notice of Postpetition Mortgage Fees, Expenses, and Charges**

12/16

If the debtor's plan provides for payment of postpetition contractual installments on your claim secured by a security interest in the debtor's principal residence, you must use this form to give notice of any fees, expenses, and charges incurred after the bankruptcy filing that you assert are recoverable against the debtor or against the debtor's principal residence.

File this form as a supplement to your proof of claim. See Bankruptcy Rule 3002.1.

Name of creditor: THE BANK OF NEW YORK MELLON, THE
SUCCESSOR TO JPMORGAN CHASE BANK, AS TRUSTEE
FOR CIT HOME EQUITY LOAN TRUST 2002-2 Court claim no. (if known): 1

Last 4 digits of any number you use to identify the debtor's account: 4386

Does this notice supplement a prior notice of postpetition fees, expenses, and charges?

No

Yes. Date of the last notice:

Part 1: Itemize Postpetition Fees, Expenses, and Charges

Itemize the fees, expenses, and charges incurred on the debtor's mortgage account after the petition was filed. Do not include any escrow account disbursements or any amounts previously itemized in a notice filed in this case. If the court has previously approved an amount, indicate that approval in parentheses after the date the amount was incurred.

	Description	Date Incurred	Amount
1	Late Charges	(1)	\$0.00
2	Non-sufficient funds (NSF) fees	(2)	\$0.00
3	Attorneys fees	(3)	\$0.00
4	Filing fee and court costs	(4)	\$0.00
5	Bankruptcy/Proof of claim fees	(5)	\$0.00
6	Appraisal/Broker's Price opinion fees	(6)	\$0.00
7	Property inspection fees	(7)	\$0.00
8	Tax Advances (non-escrow)	2/21/2019:4/1/2019	(8) \$3970.69
9	Insurance advances (non-escrow)	4/22/2019	(9) \$132.00
10	Property preservation expenses	(10)	\$0.00
11	Other. Specify:	(11)	\$0.00
12	Other. Specify:	(12)	\$0.00
13	Other. Specify:	(13)	\$0.00
14	Other. Specify:	(14)	\$0.00

The debtor or trustee may challenge whether the fees, expenses, and charges you listed are required to be paid.

See 11 U.S.C. § 1322(b)(5) and Bankruptcy Rule 3002.1

Debtor 1 Thomas M. Medofer

Print Name

Middle Name

Last Name

Case number (*if known*) 19-20826-CMB

Part 2: Sign Here

The person completing this Notice must sign it. Sign and print your name and your title, if any, and state your address and telephone number.

Check the appropriate box.

- I am the creditor
 I am the creditor's authorized agent.

I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief.



/s/ Ashlee Fogle

Signature

Date 05/14/2019

Print Ashlee Fogle Title Bankruptcy Attorney
First Name Middle Name Last Name

Company RAS Crane, LLC

Address 10700 Abbott's Bridge Road, Suite 170
Number Street
Duluth, GA 30097 State ZIP Code

Contact Phone 470-321-7112 Email afogle@rascrane.com

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that on May 24, 2019,

I electronically filed the foregoing with the Clerk of Court using the CM/ECF system, and a true and correct copy has been served via CM/ECF or United States Mail to the following parties:

Justin P. Schantz
Law Care
324 S. Maple Avenue, 2nd Floor
Greensburg, PA 15601

Ronda J. Winnecur
Suite 3250, USX Tower
600 Grant Street
Pittsburgh, PA 15219

Office of the United States Trustee
Liberty Center.
1001 Liberty Avenue, Suite 970
Pittsburgh, PA 15222

Thomas M. Medofer
M. Elaine Medofer
203 Cooperage Court
Greensburg, PA 15601

RAS Crane, LLC
Authorized Agent for Secured Creditor
10700 Abbott's Bridge Road, Suite 170
Duluth, GA 30097
Telephone: 470-321-7112
Facsimile: 404-393-1425

By: /s/ Anisha Patel
Anisha Patel
Email: apatel@rascrane.com

BKR/INFO		867 5/07/2019 6:01:29 PM ET PFSP1051
Account Number	Teller Number	Office Code 0
Debtor Information Debtor THOMAS M. MEDOFER Co-Debtor M. ELAINE MEDOFER Filed By JOINT ECOA OTHER Filed By CoBorrower Indicator <input type="checkbox"/> CB1 <input type="checkbox"/> CB2 <input type="checkbox"/> CB3 <input type="checkbox"/> CB4 <input type="checkbox"/> CB5 <input type="checkbox"/> CB6 <input type="checkbox"/> CB7 <input type="checkbox"/> CB8 <input type="checkbox"/> CB9 <input type="checkbox"/> CB10		Filing Information Chapter 13 Filing Date 03/03/19 Case Number 19-20826 State PA District WE Division PITTSBURGH
View Vendor / Website Information Lender Attorney Borrower Attorney Statement Notice B Trustee Website Court Website <A HREF=HTTP://http://www.pawb		Codes Stop Code 1 0 Warning Code 5 Stop Code 2 0 Lockout Code 0 Stop Code 3 0
Status Information Bkr Status ACTIVE Conversion Date 00/00/00 POC Status ACTIVE Date 04/23/19 Plan Status PEND CONFIRM Date 04/23/19 AO Status Date 00/00/00 Next Task Date 03/03/19 Task Desc PPPN REVIEWED Objection to Plan Filed 00/00/00		Other Information Concurrent Bkr N View N Foreclosure Y Loss Mit N Loss Draft N Junior Liens N Multiple Loans N Units Property Vacant Contractual Next Due 08/01/13 Contractual Paid to Date 07/01/13

CUST/FEES - DETAIL		867 5/08/2019 10:34:33 AM ET PFSP245		
Type	Namekey	MEDOFER	Total Amort Fee Payment	137.39
164	Description	CORP ADV 3 FPTAX	Total Fee Type Receivable	-6578.33
Assess Date	Fee Amt	Last Act	Remain Bal	AMORT FEE
08/31/12	-4,945.86	06/27/18	-1,772.89	137.39
07/09/18	-834.75	00/00/00	-834.75	0.00
04/19/19	-3,970.69	00/00/00	-3,970.69	0.00

CUSTOMER/LOAN INQUIRY		867 5/07/2019 6:03:10 PM ET PFSP213				
ACCOUNT NUMBER		M/P/A/S	P	Warn Cd 5	Lock 0	Stop Codes 0 0 0 Certified Funds 0
Borrower Information			Borrower Contact			
THOMAS M MEDOFER	SS#		Home . 0	Work . 0		
M ELAINE MEDOFER	SS#		Home . 0	Work . 0		
Address Information			Loan Information			
203 COOPERAGE COURT			Inv [REDACTED] CIT HOME EQUITY LOAN TRUST 2002-2			
GREENSBURG PA 15601			Loan Type 1 CONVENTI	Sub Type 0		
			Case# 0000000000000000	Close Code 1		
			Next Due 08/01/13	Last Pmt 02/26/18		
Payment Data		Balances	Balance View B	Loan Terms		
MONTHLY	BILLING	ORIG	55000.00	1st Pmt	03/01/98	
Total Due	10543.54	PRIN	622.00	Rate	8.87500	
Partial Pay Cd/Amt	0.00	ESCROW	0.00	BALLOON	00/00/00	
P&I	553.77	BUYDOWN	.00	Term 180	Int Meth 0	
Escrow	0.00	UF .*....	0.30	Maturity Date	06/13	
Optional Product	0.00	MERS N		Original Maturity Date	02/13	
Ancillary	137.39			Grace Days	15	
Late Charge	0.00			LC 5.000	NO LTCCHG	
Total	691.16			LC Code 0		

DISPLAY/CHECK REFERENCE		867 5/08/2019 10:36:30 AM ET PFSP409				
Acct [REDACTED]	Name THOMAS M MEDOFER	Dsp .		State 39		
Check Ref No.	Payee Number	Abbreviated Payee Name	Tran Code	Tran Date	Disburse Amount	Check Total Tell No
20003341	1300 0	ASSURANT INSURA	E10	04/18/19	132.00	11552.20 0
60161980	65 3033	MT PLEASANT TOW	E91	04/02/19	745.08	745.08 0
80137534	65 6033	MT PLEASANT SCH	E93	02/22/19	3225.61	3225.61 0
10158970	0 0	THOMAS M MEDOFE	M02	01/30/19	4319.14	4319.14 590
20002925	1300 0	ASSURANT INSURA	E20	06/12/18	1234.00	6716296.00 0
60122563	65 6033	MT PLEASANT SCH	E93	08/30/17	2840.99	2840.99 0
20002499	1300 0	ASSURANT INSURA	E20	06/08/17	1212.00	2900070.27 0
60115075	65 3033	MT PLEASANT TOW	E91	04/14/17	745.08	745.08 0

Data Source	Expense Description	Date Paid	Amount	Insurance Balance	Tax Balance	Unspecified Balance	Balance
ODS from Fiserv	Disbursement School	9/28/2010	(\$2,358.01)	\$0.00	(\$2,358.01)	\$0.00	(\$2,358.01)
ODS from Fiserv	Disbursement Homeowners Ins / Condo Master	10/16/2013	(\$1,431.00)	(\$1,431.00)	(\$2,358.01)	\$0.00	(\$3,789.01)
ODS from Fiserv	Disbursement Homeowners Ins / Condo Master	6/9/2014	(\$1,275.00)	(\$2,706.00)	(\$2,358.01)	\$0.00	(\$5,064.01)
ODS from Fiserv	Disbursement County Tax	3/12/2015	(\$7,911.49)	(\$2,706.00)	(\$10,269.50)	\$0.00	(\$12,975.50)
ODS from Fiserv	Disbursement Assessments/Utility	3/12/2015	(\$4,366.59)	(\$2,706.00)	(\$14,636.09)	\$0.00	(\$17,342.09)
ODS from Fiserv	Disbursement Homeowners Ins / Condo Master	6/8/2015	(\$1,302.00)	(\$4,008.00)	(\$14,636.09)	\$0.00	(\$18,644.09)
ODS from Fiserv	Disbursement School	9/14/2015	(\$2,686.15)	(\$4,008.00)	(\$17,322.24)	\$0.00	(\$21,330.24)
ODS from Fiserv	Disbursement City/Town/Township	4/1/2016	(\$745.08)	(\$4,008.00)	(\$18,067.32)	\$0.00	(\$22,075.32)
ODS from Fiserv	Disbursement Homeowners Ins / Condo Master	6/8/2016	(\$1,322.00)	(\$5,330.00)	(\$18,067.32)	\$0.00	(\$23,397.32)
ODS from Fiserv	Disbursement School	9/6/2016	(\$2,772.18)	(\$5,330.00)	(\$20,839.50)	\$0.00	(\$26,169.50)
ODS from Fiserv	Disbursement City/Town/Township	4/13/2017	(\$745.08)	(\$5,330.00)	(\$21,584.58)	\$0.00	(\$26,914.58)
ODS from Fiserv	Disbursement Homeowners Ins / Condo Master	6/7/2017	(\$1,212.00)	(\$6,542.00)	(\$21,584.58)	\$0.00	(\$28,126.58)
ODS from Fiserv	Disbursement School	8/29/2017	(\$2,840.99)	(\$6,542.00)	(\$24,425.57)	\$0.00	(\$30,967.57)
ODS from Fiserv	Escrow Payment	1/24/2018	\$6,542.00	(\$3,836.00)	(\$20,589.57)	\$0.00	(\$24,425.57)
ODS from Fiserv	Escrow Payment	1/24/2018	\$24,425.57	\$0.00	\$0.00	\$0.00	\$0.00
ODS from Fiserv	Disbursement Homeowners Ins / Condo Master	6/11/2018	(\$1,234.00)	(\$1,234.00)	\$0.00	\$0.00	(\$1,234.00)
ODS from Fiserv	Escrow Payment	6/14/2018	\$1,234.00	\$0.00	\$0.00	\$0.00	\$0.00
ODS from Fiserv	Refund Homeowners Ins / Condo Master	1/23/2019	\$420.00	\$0.00	\$0.00	\$420.00	\$420.00
ODS from Fiserv	Escrow Payment Reversal	2/4/2019	(\$420.00)	\$0.00	\$0.00	\$0.00	\$0.00
ODS from Fiserv	Disbursement School	2/21/2019	(\$3,225.61)	\$0.00	(\$3,225.61)	\$0.00	(\$3,225.61)
ODS from Fiserv	Disbursement City/Town/Township	4/1/2019	(\$745.08)	\$0.00	(\$3,970.69)	\$0.00	(\$3,970.69)
ODS from Fiserv	Disbursement LPI Binder Lapse	4/17/2019	(\$132.00)	(\$132.00)	(\$3,970.69)	\$0.00	(\$4,102.69)
ODS from Fiserv	Escrow Payment	4/22/2019	\$132.00	(\$132.00)	(\$3,838.69)	\$0.00	(\$3,970.69)
ODS from Fiserv	Escrow Payment	4/22/2019	\$3,970.69	\$0.00	\$0.00	\$0.00	\$0.00



P.O. Box 7731
Springfield, OH 45501-7731

April 22, 2019

THOMAS M MEDOFER
M ELAINE MEDOFER
C/O JUSTIN P SCHANTZ
324 S MAPLE AVE FL, 2ND FL
GREENSBURG, PA 15601-3219

**WARNING - NOTICE OF PURCHASE OF HAZARD INSURANCE
PLEASE READ CAREFULLY - ACTION REQUIRED**

Property Address:
203 COOPERAGE COURT
GREENSBURG, PA 15601

Mortgage Loan Account Number: [REDACTED]

Insurance Lapse Dates: 02/01/2019 to 03/12/2019

Dear THOMAS M MEDOFER:

We recently sent to you two notices requesting proof of acceptable hazard insurance coverage for the time frame referenced above, but we have not received it. You are required to have continuous coverage in effect and because we have not received acceptable proof of continuous insurance, we bought insurance for your property. We have charged your escrow account in the amount of \$132.00. If you did not have an escrow account, one was established on your loan for the purposes of paying this insurance. As a result, your monthly mortgage payment will increase to pay for the cost of this policy. You must reimburse us for any period during which insurance we bought is in effect but you do not have insurance.

The insurance we purchased on your property is effective from 02/01/2019 to 03/12/2019 (the "Lapse Period"). If you had hazard coverage on your property during this time, we strongly recommend you send us proof of coverage for the Lapse Period. This information must be provided in writing. All you need to do is ask your insurance agent to include the loan number and property address above on a copy of your policy and fax it with a Mortgagee Clause/Lender's Loss Payable Endorsement as soon as possible to: 1-937-525-4120. You/your agent can mail the documents to:

CALIBER HOME LOANS, INC.
ISAOA/ATIMA
PO BOX 7731
SPRINGFIELD, OH 45501-7731

Or, you may update your hazard insurance coverage information online at www.MyCoverageInfo.com, referencing PIN CT731.

The insurance we bought:

- May be significantly more expensive than the insurance you can buy yourself.
- May not provide as much coverage as an insurance policy you buy yourself.